	MULTIPLE DEPENDENT CLAIM								SERIAL NO.				FILING DATE		
FEE CALCULATION SHEET									10/560027 APPLICANT(S)						
(FOR USE WITH FORM PTO-875)  APPLICANT(S)															
	CLAIMS														
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TOTAL CLAIMS			16					TOTAL CLAUMS							
PTO - 1360 (	(REV. 11/04)									S. DEPARTM					